## American Indian Education Center Program 2019–20 PROGRAM APPLICATION COVER PAGE

Return to:		Status of Application:	
Improvement and Accounta California Department of Ec 1430 N Street, Suite 6208 Sacramento, CA 95814-590	lucation	Requ	est for Applications
Program	Date	Am	ount (Budget Summary
Start Date	End Date		
Applicant Name			
Legal Status of Agency:	Nonprofit Indian Co	rporation	Tribal
Address	City	County	Zip
Certification			
I hereby certify that all appli that to the best of my knowl and complete; and that the the operations of this project	edge, the information of attached assurances a	contained in this are accepted as t	application is correct he basic conditions for
Signature of Contact Person	n/Center Director	Date	
Title	Email Address	PI	none Number
Signature of Board or Triba	l Chairperson	Date	
Title	Email Address	PI	none Number
California Department of Ed	lucation		January 201